

**Contract Program Report for Legal Service Providers to
Victims of Family Violence for FY 2015**

Agency

Tax ID Number

Project Title

☐ Monthly ☐ Quarterly ☒ Semi-annual ☐ Annual

6-month Period Covered by Report

Ms. Cynthia H. Clanton
General Counsel
Administrative Office of the Courts of Georgia
244 Washington Street, S.W., Suite 300
Atlanta, Georgia 30334-5900
Phone (404) 656-6692 Fax (770) email: cynthia.clanton@gaaoc.us

Project Narrative and Analysis for Period

<u>Project Objectives Outlined in Grant Application</u>	<u>Status</u>	<u>Barriers</u>	<u>Anticipated Completion Date</u>
1.			
2.			
3.			
4.			
5.			

Uniform Success Measures During the 6 Month Period

I. Type of Clients*:

	<u>Number</u>
<u>Women</u>	
Race:	
African-American	_____
Asian/Pacific	_____
Caucasian	_____
Hispanic/Latino	_____
Other	_____
Total Number of Women Assisted:	_____

Children

Race:	
African-American	_____
Asian/Pacific	_____
Caucasian	_____
Hispanic/Latino	_____
Other	_____
Number of Children Kept Out of State Custody:	_____
Total Number of Children Assisted:	_____

Men

Race:	
African-American	_____
Asian/Pacific	_____
Caucasian	_____
Hispanic/Latino	_____
Other	_____
Total Number of Men Assisted:	_____

*Client = direct beneficiary of legal services funded by grant funds (ex. Mother with 2 children= 1 client if mother is represented by attorney).

II. Direct Legal Services to Clients:**

	<u>Number</u>
Protective Order (not initial TPO)	_____
Medical/Access to Healthcare	_____
Child Custody	_____
Family/Child Support	_____
Housing Issues	_____
Employment Issues	_____
Property	_____
Public Benefits/TANF	_____
Financial/Consumer	_____
Other (Please Specify)	_____

** Also complete services by judicial circuit worksheet

III. Cost:

Average cost per client \$_____ ***

***Cost per client = Average amount of grant funds used for legal services per actual client; each service for the same client does not equal a "new client").

IV. Repeats and Referrals:

Number

Repeat Clients
(File Closed and Client Returns) _____

Clients Referred from
Georgia Legal Services or Atlanta
Legal Aid _____

Clients Referred to
Georgia Legal Services or Atlanta
Legal Aid _____

V. Additional Data:

Divorces Provided with other Funding Sources _____

This grant does not currently fund divorces for victims

These numbers are accurate to the best of my knowledge and reflect this agency's use of state funds for victims of family violence.

Director's Signature

Tax ID # _____